

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB		9/15/93
O.I.P.E. CLASSIFIER	THM	66294	24/10/93
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	1/4/93
Original	1/21/93
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Claim	Date
Final	1/9/93
Original	1/21/93
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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